## EXHIBIT C

Page 399 BY MR. SWANSON: 1 2 So when you say that it's a red flag if a patient 3 travels more than 25 miles to see his or her prescriber, you're saying if somebody said I 4 think it's more reasonable to be -- to set it at 5 35 miles, you'd say no, reasonable minds can't disagree about this, it's 25 miles? 7 MR. ELSNER: Objection. 9 Α The question as you've posed it, the DEA in their 10 guidance in other documents have pointed out 11 specific red flags. So distance is a red flag. 12 25 miles is a parameter that, as I've determined, is a safe parameter to utilize. So a pharmacist 13 14 may, in their professional and independent 15 judgment, make a determination that 30 miles or 16 20 miles may not be a red flag. But it's still a 17 red flag for them to conduct further due diligence. 18 The red flags the DEA have identified, those are not things that are discussed or debatable. 19 20 They are actually standards of care in that 2.1 highway. 22 BY MR. SWANSON: 23 Q But my question was a bit more basic. Can reasonable minds differ as to what constitutes a 24 25 red flag?

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Page 418 you can't tell me what percentage of those 37,066 1 2 prescriptions you claimed were written for an illegitimate reason, true? MR. ELSNER: Objection. 4 5 Α My answer is significant and significant would be far greater than 10, 20, or 30 percent. Probably 6 7 more in the range of between 70 and 80 or 90 percent, sir. BY MR. SWANSON: 9 10 Oh, so your opinion -- your opinion is that 70 to Q 90 percent of those 37,066 prescriptions were 11 12 written for an illegitimate reason? 13 Α No, sir. You asked me to define just sitting in 14 the chair today what I thought would be a 15 significant number. And to me, a significant 16 number is somewhere to 70, 80 percent. Again, lacking the documentation, I cannot quantify 17 whether or not those 37,000 prescriptions fell into 18 that category. But if you ask me what's the 19 20 difference between significant and others, for me a 2.1 significant number of prescriptions would be 70, 22 80 percent if I could make that determination, sir. 23 Q So a significant quantity of controlled substances at 70 to 80 percent to you? 24 25 Objection. MR. ELSNER:

Page 509 Short of some PHI, you have the dispensing -- you 1 2 have the dispensing pharmacist's name, you have the prescriber's name, you are have the dosage amount. You have all that information. Why can't you make 4 5 the assessment? 6 MR. ELSNER: Objection. 7 BY MR. KOBRIN: Why are you only dealing with this in aggregate? Q 9 MR. ELSNER: Objection. 10 Α The only data I received in that regard were sample 11 data from the individual defendants, but I did not 12 look at the entire prescription database. 13 BY MR. KOBRIN: So you're saying that you can't judge the percent 14 15 of prescriptions for any particular opioid that 16 were paid for in cash because every prescription has to be looked at individually, correct? 17 18 MR. ELSNER: Objection. Let me explain and see if I understand the question 19 20 correctly, sir. 2.1 What I'm saying is that the percentages of the 22 red flags that each of the defendants had in regard 23 to what is significant or how many of those were 24 actually red flags, I don't have that 25 information -- I don't have that information absent

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